

**CERTIFICATION OF EMERGENCY RULES
FILED WITH LEGISLATIVE SERVICES AGENCY
OTHNI LATHRAM, DIRECTOR**

Pursuant to Code of Alabama 1975, §§41-22-5 (b) and 41-22-6 (c) (2) a. and b.

I certify that the attached emergency rule is a correct copy as promulgated and adopted on the 14th day of April 2020.

AGENCY NAME: Alabama Medicaid Agency

RULE NO. AND TITLE: Rule No. 560-X-37-.10 ER Payments to Primary Care Physicians and Delivering Healthcare Professionals Participating with the Alabama Coordinated Health Network

EFFECTIVE DATE OF RULE: April 14, 2020

EXPIRATION DATE (If less than 120 days): _____

NATURE OF EMERGENCY:

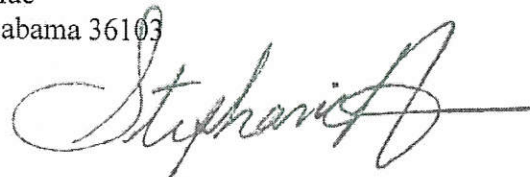
The above-referenced rule is being amended to suspend restrictions related to DHCP referral process in accordance with the time prescribed by the governor as a State of Emergency due to the COVID-19 (Coronavirus) pandemic.

STATUTORY AUTHORITY: Social Security Act, Title XIX, State Plan, Attachment 4.19-B.

SUBJECT OF RULE TO BE ADOPTED ON PERMANENT BASIS ___ YES X NO

NAME, ADDRESS, AND TELEPHONE NUMBER OF PERSON TO CONTACT FOR COPY OF RULE:

Administrative Secretary
Alabama Medicaid Agency
501 Dexter Avenue
Montgomery, Alabama 36103
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Stephanie McGee Azar
Commissioner

REC'D & FILED

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LEGISLATIVE SVC AGENCY

Medicaid recipients attributed to the PCP group, as determined in accordance with Rule 560-X-37-.09, for the prior quarterly period.

4. Cost Effectiveness Performance Payments: All Participating PCP groups that meet or exceed cost effectiveness criteria established by the Agency are eligible to receive a quality cost effectiveness bonus payment.

(i) Quarterly cost effectiveness payments for the period between October 1, 2019, and December 31, 2020, will be distributed to each PCP group based on the number of Medicaid recipients attributed to the PCP group, as determined in accordance with Rule 560-X-37-.09, for the prior quarterly period.

(ii) Quarterly cost effectiveness payments after January 1, 2021, will be based on actual performance. The cost effectiveness performance calculation compares a 12-month per member per month (PMPM) to a risk-adjusted expected PMPM based on the costs of similar PCP groups that treat Medicaid recipients. Groups will be ranked by an efficiency score that is derived from actual PMPM versus the expected PMPM. The cost effectiveness performance payment will be made for the PCPs at or below the median efficiency score. This calculation will occur as soon as the previous calendar year's performance has been calculated. These payments will be distributed to each PCP group based on the number of Medicaid recipients attributed to the PCP group, as determined in accordance with Rule 560-X-37-.09, for the prior quarterly period.

5. PCMH Recognition Performance Payments: The purpose of the PCMH Recognition performance payment is to incentivize providers to attain PCMH Recognition thereby ensuring Medicaid recipients are receiving care through a nationally recognized medical home model. All PCP groups who receive PCMH recognition will receive a quarterly bonus payment. The PCP group can obtain PCMH Recognition or certification through a nationally recognized entity such as National Committee for Quality Assurance (NCQA).

(i) Payments made for the period between October 1, 2019, and September 30, 2020, will be made based on the number of Medicaid Recipients attributed to the PCP group, as determined in accordance with Rule 560-X-37-.09, for the prior quarterly period.

(ii) Payments made after October 1, 2020, will be based on the PCP groups attestation of PCMH Recognition. The amount of the bonus payment will be distributed based on the number of Medicaid Recipients attributed to the PCP group, as determined in accordance with Rule 560-X-37-.09, for the prior quarterly period. Beginning October 1, 2020, if a PCP group does not meet PCMH Recognition, the Agency will not pay the PCMH bonus payment to the PCP group.

(2) Delivering Healthcare Professionals (DHCPs)

(a) To participate with an ACHN, a DHCP group must engage with an ACHN as follows:

1. A DHCP must sign a Delivering Healthcare Professional Group Agreement with an ACHN;
2. Provide data to the ACHN;
3. Engage in the development of the Medicaid recipient's care plan; and
4. Engage in the DHCP selection and referral process. Exception: During the time prescribed by the governor as a State of Emergency due to the COVID-19 (Coronavirus) pandemic, but only in strict accordance with the March 26, 2020 provider Alert with subject line "Temporary Changes to ACHN Care Coordination, PCP/DHCP Referrals, and Medical

Management Meetings” and any successor Alert or amendment thereto, the DHCP referral process requirement will be temporarily lifted.

(b) Participation requirements will be monitored on a monthly basis by ACHNs and Alabama Medicaid. If the ACHN indicates a DHCP group is not providing data to the ACHNs, engaging in the development of the care plan, or engaging in the selection and referral process, Alabama Medicaid and the ACHN will make the determination to end the DHCP’s contract. DHCPs who fail to meet these requirements will neither be referred Medicaid recipients by the ACHN nor will be able to provide maternity services to the ACHN population.

(c) DHCPs participating with the ACHN are eligible to receive a bonus payment for providing the following services:

1. an initial prenatal visit in the first trimester and/or
2. a post-partum visit.

Author: Jerri Jackson, Director, Managed Care Operations

Statutory Authority: Social Security Act, Title XIX, State Plan, Attachment 4.19-B.

History: Filed February 19, 2020; effective April 13, 2020. Emergency rule filed and effective: April 14, 2020.